Kentucky Department for Medicaid Services

Pharmacy and Therapeutics Advisory Committee Recommendations

November 18, 2004 Meeting

This chart provides a summary of recommendations that were made by the Pharmacy and Therapeutics Advisory Committee at the November 18, 2004, meeting. Review of recommendations by the Secretary of the Cabinet for Health and Family Services and final decisions is pending.

Item	Description of Recommendation	P & T Vote
#1	**Benign Prostatic Hypertrophy Agents** 1. All products in the non-selective alpha-blocker class (doxazocin, terazocin) should be available without prior authorization. 2. All products in the selective alpha-blocker class (tamsulosin, alfuzocin) are considered clinically equivalent in efficacy and safety. 3. Select at least one product in the selective alpha-blocker class as preferred based on economic evaluation. 4. All products in the 5-alpha reductase inhibitor class (finasteride, dutasteride) are considered clinically equivalent in efficacy and safety. 5. Choose one 5-alpha reductase inhibitor as preferred based on economic evaluation. 6. Require a prior authorization on all 5-alpha reductase inhibitors if no claim for alpha-blocker in claims history. 7. For any new chemical entity in the alpha-blocker or 5-alpha reductase inhibitor class, require a PA and quantity limit until reviewed by the P&T Advisory Committee.	Passed 5 - For 3 - Against
#2	**Erectile Dysfunction / PDE5 Inhibitors** 1. All products within the class are considered clinically equivalent in efficacy and safety. 2. Select at least one (1) product from the class as preferred based on economic evaluation. 3. Require a quantity limit of #2 capsules/tablets per month. 4. For any new chemical entity in the class, require a PA and similar quantity limit until reviewed by the P&T Advisory Committee.	Passed 6 - For 2 - Against